

TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>		Application Number	10/698,099
		Filing Date	October 31, 2003
		First Named Inventor	Schenk, Dale B.
		Art Unit	1614
		Examiner Name	Unassigned
		Attorney Docket Number	015270-008930US
Total Number of Pages in This Submission			

PTO/SB/21 (09-04)

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ENCLOSURES (Check all that apply)		
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Remarks: The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature	<i>Rosemarie L. Celli</i>		
Printed name	Rosemarie L. Celli		
Date	February 25, 2005	Reg. No.	42,397

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, Fax No. (703) 872-9306 on February 25, 2005.			
Signature	<i>Hubrett Baker</i>		
Typed or printed name	Hubrett Baker	Date	2/25/05

60431389 v1

PTO/SB/01 (11-04)

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/698,099
Filing Date	October 21, 2003
First Named Inventor	Dale B. Schenk
Title	Prevention and Treatment of Synucleinopathic Disease
Art Unit	1814
Examiner Name	Unassigned
Attorney Docket Number	015270-008930US

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint

☒ Practitioners associated with the Customer
Number:

20350

OR

☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

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I am the:

☐ Applicant/Inventor.☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/98).**SIGNATURE of Applicant or Assignee of Record**

Signature		Date	2/23/05
Name	Carl Battle	Telephone	650-616-2644
Title and Company	Senior Vice President, Chief Intellectual Property Counsel, Elan Pharmaceuticals, Inc.		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 form are submitted.

60365685 v1

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PTO/BB/93 (03-03)

Attorney Docket No. 016270-008930US

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Dale B. Schenk et al.Application No./Patent No.: 10/898,089Filed/Issue Date: October 31, 2003Entitled: Prevention and Treatment of Synucleinopathic DiseaseElan Pharmaceuticals, Inc. a corporation

(Name of Assignee)

(Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☒ the assignee of the entire right, title, and interest; or
2. ☐ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is _____%

In the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 014249, Frame 0522, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____

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☐ Additional documents in the chain of title are listed on a supplemental sheet.

☐ Copies of assignments or other documents in the chain of title are attached.

[NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.6]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Feb. 25, 2005

Date

650 328-2400

Telephone number

Rosemarie L. Celli

Typed or printed name

Rosemarie L. Celli

Signature

Title

60431372 v1